On January 15, 1939, the first year of Medical Anesthesia was completed. Above all, we wish to express our deep appreciation to the Surgical Staff, and especially to its Director, for their splendid cooperation, without which very little can be accomplished. The House Staff also have been stimulating in their interest, and eager to act on suggestions with regard to choice of agents and technics, and premedications. Miss. Penland and her associates rendered us invaluable assistance which leaves nothing to be disired, especially with the planning of the teaching schedule. The administration has been most helpful with our demands for new equipment, and with the mumerous problems related to the establishment of residencies.

The general lan for teaching, clinical work, and research has been inaugurated.

A. Clinical Work: 940 cases on 13 services were anesthetized by medical anesthetists. A detailed chars has been kept of preoperation and postoperation complications as well as operative data for each case. For each chart a Hollerith Punch Card was made according to the National Anesthesia Code. Data from these cards will be available within a month. Miss Dorothy Kurtz has made many valuable suggestions and future use of this method of statistical analysis will be under the direction.

B. Residencies: Two residents in anesthesia have been added to replace vacancies on the surse anasthetist staff. Dr. Robert Gladstone began service October 15, 1938 and Dr. Charles Stein December 8, 1938. The teaching of the residents has been individual, to date. Dependent in their past experience. An effort is made to acquaint them thoroughly with inhalational methods and agents as the basis for their anesthesia training. Intravenous methods have been used in Sloane Hospital and the Ear Nose and Throat service. The regional techenics have been practiced frequently on cadavers and used at the request of the various clinics in dealing with intractable pain. Anesthesia staff meetings have not het been started because of the small size of the group, but the weekly staff meeting at B lievue Hospital has been attended regularly.

C. Undergraduate Teaching has proved to be quite time-consuming but this will be remedied as the resident staff is increased. Since September 1st, over 300 cases have been anesthetized by the fourth year students. Each group in additionhhas received an average of 8-10 hours of didactic work during the 8 mornings of anesthesia work, a certain amount of outside reading is also required. One combined of

clinic on "Resuscitation" was given in November.

D. Meetings: One short talk on "neurological Complication of Spinal Anesteesia" was given at a Surgical Comference in March.

At the yearly meeting in April of Dr. Ralph Waters's former residents at Madison, Wisconsin, a report on "Oxygen Want in Spinal Amesthesia" was made.

The first two lectures in the House Staff Graduate Series were on the subject of "Anesthesia".

On October 19, the visiting Congress Of Anesthetists was entertained at the Presbyterian Hospital. About 150 members attended. Papers were presented by Drs. Humphreys and Moore, Dr. Barach, and Dr. Williams and one paper from this division on "Experience with Pontocaine Spinal Anesthesia".

Other meetings attended were those of the American Society of Anesthetiests at New Haven and New York, besides the week of meetings

of the Congress of Anesthetists.

E. Research: Two research problems are under way, one with Dr. George Humphreys on the "Effect of Intrathoracic procedures on circulation in the human subject" and one with Drs. Drew and Scudder on "The Effect of Avertin on blood specific gravity". Apparatus is being assembled for work on the "Effect of Avertin anesthesia on

pulmonary ventilation".

F. Library: Mr. Firming the Medical Librarian, has obtained all the 200 references suggested as a basis for an anesthesia library as well as complete bound sets of "Anesthesie et Analgesie", "Schwerz-Narkose" and "Giomale Italiano de Anestesia e di Analgesia". The British and American Journals will soon be completed. In addition two "Bibliofilms" of a rare copy of "A Physical Dissertation on Drowning" published in 1747, and of "The Connexion of Life with Respiration", 1788 have been obtained from the Library of Congress. These are the first Bibliofilms to be requested for the medical library. The Reprint Collection is being enlarged frequently.

G. Miscellaneous: One explosion resulted from the use of nitrous oxide-ether anesthesia in Sloane Hospital. The case was investigated by Drs. Moratio B. Williams, Kenneth Cole and Karl Connell. The explosion hazard in anesthesia is constantly being studied and the technic is being changed to increase the safety margin for both patient

and anesthetist.

Many visitors brought us interesting problems from many countries. Among the Anesthetists entertained were some from London, Vienna, Capetown, South Africa, Santiago, Chile, and Sydney, Australia.

The first part of the examinations f r Fellow of the American Board of Anesthesioloty was passed in October. The second part will be taken this year. Work for the degree of Doctor of Medical Science in Anesthesia will begin as soon as time permits.

Plans for 1939: The enlargement of the Amesthesia staff will continue as started-by repl cing vacancies in the nursing staff with graduate physicians planning to specialize in anesthesiology.

The residents training will be enlarged to include the Eye, Neurological and Obststrical services as time permits. We have already been requested to take over all the obstetrical anesthesia but this is obviously impossible at present. Further opportunities to perform block anesthesias are needed, whether for surgical procedures,

treatment of intractable pain due to malignancy, or for relief of pain in cases with fractured ribs. The intravenous anesthesia clinics

will be enlarged especially in Sloane Hospital.

Anesthesia staff conferences should be held weekly to discuss interesting cases, deaths, and numerous topics related to anesthesia.

It is also planned to have residents present on division rounds, whenever possible.

Miss Kurtz has suggested a solution for the problem of keeping detailed charts, havin them incorporated in the patient's record during the hospital stay, and filed permanently in the anesthesia office for teaching purposes. This will be tried out in the near future.

It would be desirable in the new plan for training of surgical residents, to include some work in practical anesthesis.

Meetings at Madison, Bisconsin in April, and the A.M.A. meeting in St. Louis, Mo. will be attended, the latter as a demonstrator of the Amesthesia Exhibit.

Again we express our appreciation of the cooperation given by the Surgical Staff and trust it will continue in 1939. Criticism of the anesthesia service is invited and any suggestions will be carefully considered.

Respectfully submitted.

Virginia Apgar Attending Anesthetist Presbyterian Hospital